PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop SSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

Nome of the state	y /	'' I IOOI	E PPP1	DUDITO	TION FEE (C.	(1) D1 1-1 1 1 5		
appropriate. All urfler con indicated unless corrected maintenance fee notification	rrespondence including the below or directed otherwise	Patent, advance or in Block 1, by (a	ders and noti) specifying	ification of a new corr	maintenance fees verspondence address	ired). Blocks I through 5 will be mailed to the current and/or (b) indicating a se	should be completed where nt correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
000043399 75	590 02/23/2006			na	ive its own certificate	of mailing or transmission	•	
EVELYN M. SOMMER 250 PARK AVE RM 825 NEW YORK, NY 1023 1/6/77				I I St ac tra	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
					EVELYN.	M. SOMMER	(Depositor's name)	
					Tovalen	W. Somme	(Signature)	
					march	~7 2006	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INV		D INVENTO	PR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/366,858 08/04/1999 WII				VILLIAM DRENTTEL HD-100US 3583				
FITLE OF INVENTION: A Structure	METHOD AND SYSTEM F	OR COMPUTER S	SCREEN LA	YOUT BA	SED ON A RECOM	IBINANT GEOMETRIC N	MODULAR	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBI	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700			\$0	\$700	05/23/2006	
EXAMINER			NIT CLASS-SUBCLASS					
HUYNH, THU V		2178		7	07-517000		•	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	RESIDENCE DATA TO B						_	
PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN		elow, no assignee of this form is NOT	data will apper a substitute in (B) RESIDE	ear on the for filing a NCE: (CIT	patent. If an assign n assignment. 'Y and STATE OR C	ee is identified below, the 03/34/2906 MAHMED2 01 FC:2501	document has been filed for 00000056 09366858 700.00 QF	
Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the pa	atent):	Individual Co	rporation or other private g	roup entity Government	
la. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of	b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.				L ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and Penterest as shown by the reco	is requested to apply the Issuublication Fee (if required) vords of the United States Pate	ne Fee and Publicati vill not be accepted ent and Trademark (ion Fee (if an from anyone Office.	y) or to re- other than	apply any previously the applicant; a regi	paid issue fee to the applic stered attorney or agent; or	cation identified above. the assignee or other party in	
Authorized Signature	4 . 11					nch v7 v00	···	
Typed or printed name	CVELYN M	1. SOMME	P		Registration N	0. 19.603		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.